

CALIFORNIA MEDICAL ASSISTANCE COMMISSION



ANNUAL REPORT 2002

**CALIFORNIA MEDICAL ASSISTANCE COMMISSION
ANNUAL REPORT TO THE LEGISLATURE
2002**

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EXECUTIVE SUMMARY

SELECTIVE PROVIDER CONTRACTING PROGRAM

This nineteenth Annual Report to the Legislature by the California Medical Assistance Commission (CMAC) reports access and cost information relating to the past year's operation of the Selective Provider Contracting Program (SPCP).

The Selective Provider Contracting Program was established by the Legislature in 1982. The program operates under federal waiver in accordance with Section 1915(b)(4), Title XIX, of the Social Security Act. Through the SPCP the State selectively contracts, on a competitive basis, with those hospitals in California that desire to provide services to Medi-Cal beneficiaries. The California Medical Assistance Commission is the agency established to negotiate with hospitals on behalf of the State.

The SPCP has operated successfully for almost nineteen years. Competitive contracting has assured continued hospital access for beneficiaries while, at the same time, saving the State and federal governments substantial funds.

BENEFICIARY ACCESS

From its inception, the SPCP has selectively contracted with hospitals to provide services to beneficiaries. The requirement that the program ensure sufficient hospital beds to serve the Medi-Cal population has always been a key criterion in determining which hospitals should be contracting hospitals.

The 236 general acute care hospitals contracting with the State of California have sufficient capacity to provide all of the inpatient care necessary for beneficiaries in the areas where these hospitals operate. These 236 hospitals have over four times the number of available licensed beds necessary to meet the inpatient needs of Medi-Cal beneficiaries in the State.

PROGRAM SAVINGS

In addition to assuring hospital access for beneficiaries through the competitive contracting program, the State has saved a significant amount of funds - a total of approximately \$6.07 billion or more in savings since 1983. These are funds that would have been spent had the State continued operating under the traditional, cost based reimbursement system, which is in place in most of the United States.

This report uses an estimating methodology to calculate statewide savings attributable to the SPCP, which yields a projected estimate for hospital savings alone of \$1.31 billion for fiscal year 2001/02. After taking into account all payment programs and considerations authorized under the waiver and described in this report, net savings for the fiscal year are estimated at \$318 million.

Based on a fiscal year 2001/02 average statewide Medi-Cal contract rate of \$957 per day, the average contract rate has increased 86.6%, or approximately 3.5% per year on a compound basis since the inception of the program. For non-contracting hospitals remaining under the cost-based reimbursement system, the average payment rate for the same period has increased 130.0% or approximately 4.74% per year on a compound basis.

CONCLUSIONS

In summary, the Selective Provider Contracting Program continues to assure access to hospital inpatient services to Medi-Cal beneficiaries, and to remain a cost-effective program for delivering and paying for hospital inpatient services in the year 2002.

SELECTIVE PROVIDER CONTRACTING PROGRAM

EFFECT OF SELECTIVE CONTRACTING ON ACCESS, QUALITY AND COST

The primary responsibility of the California Medical Assistance Commission continues to be maintaining the integrity of the Selective Provider Contracting Program (SPCP). For more than nineteen years, the SPCP has worked to provide adequate access to hospital services for Medi-Cal beneficiaries, while at the same time achieving significant savings over the traditional "cost-based" reimbursement system being utilized by most other states. Employing the concepts of competition and negotiation, the SPCP has almost two decades of experience to demonstrate the value of those concepts in the purchase of health care services.

HOSPITALS AVAILABLE FOR MEDI-CAL BENEFICIARIES

The Commission has provided updated statistics to the Legislature each year that describe the extent of hospital inpatient services available under contract. An important consideration in evaluating the program has been the extent to which the "selective" aspect of the contracting program could result in too few hospital beds and services available to Medi-Cal beneficiaries. A variety of analyses have been presented in previous reports to describe the availability and use of contracted services. Many of those analyses are updated for this report.

Of the 236 general acute care hospitals under contract, 233 hospitals are under contract in 64 "closed areas" of the State. "Closed areas" are those Health Facility Planning Areas (HFPAs) where contracts have been signed and Medi-Cal beneficiaries must receive inpatient care at a contract hospital, except in emergencies or as provided for under Welfare and Institutions Code Section 14087. Three other hospitals are under contract in "open areas" of the State. "Open areas" are those Health Facility Planning Areas where the Selective Provider Contracting Program is not in effect. These are primarily rural, one-hospital areas where the principles of competitive contracting do not apply. In 2001, the designations of the Reedley contracting area, HFPA-607, and Los Banos, HFPA-517, were changed from "closed" to "open". This was due to the contract termination of the area's four contract hospitals. A listing of all HFPAs, along with their current SPCP status, is included in this report as Appendix A.

The number of hospitals entering into new contracts, terminating contracts and recontracting after termination since December 1, 1982 is presented in Table 1. A total of 236 general acute care hospitals were under contract as of December 1, 2001: eleven fewer hospitals when compared to the previous year. This resulted from the termination of ten contracts, the closure of one hospital, the placing of all beds in suspense at one hospital, and the addition of one hospital contracting for the first time as identified in Table 1A. A listing of all contract hospitals available to Medi-Cal beneficiaries as of December 1, 2001 is provided in Appendix B.

TABLE 1
CONTRACT CHANGES
FROM DECEMBER 2, 1982 TO DECEMBER 1, 2001

	PRIOR PERIODS			ANNUAL CHANGES			TOTAL
	82/86	86/90	90/98	98/99	99/00	00/01	82/01
Contracts at Start	0	271	236	250	251	247	0
New Contracts	293	21	53	2	4	1	374
Terminations	-30	-67	-74*	-2	-8	-12	-193
Recontracted	8	11	35	1	0	0	55
Contracts at End	271	236	250	251	247	236	236

* Seven of these terminations were the result of converting the contract fee-for-service mental health system to the State Department of Mental Health's managed care system effective January 1, 1995.

Source: CMAC Management Information System

TABLE 1A

**HOSPITALS WITH MEDI-CAL CONTRACT CHANGES
FROM DECEMBER 2, 2000 THROUGH DECEMBER 1, 2001**

HOSPITAL	LOCATION
Hospitals Initiating Contracting for the First Time (1)	
Miller Children's Hospital (separated from Long Beach Memorial Medical Center)	Long Beach
Hospitals Recontracting (0)	
None	
Hospitals Terminating (11) (*) Indicates that hospital is no longer in operation	
Woodland Hospital	Woodland
Bakersfield Heart Hospital	Bakersfield
*Pacific Coast Hospital	San Francisco
Memorial Hospital of Los Banos	Los Banos
Madera Community Hospital	Madera
Kingsburg Medical Center	Kingsburg
Sanger General Hospital	Sanger
Selma District Hospital	Selma
Sierra Kings Hospital	Reedley
*Martin Luther Hospital Medical Center	Fullerton
San Antonio Community Hospital	Upland
Contract Changes Due to Mergers/License Consolidations (1)	
(FACILITY NO LONGER COUNTED AS A CONTRACT HOSPITAL, BUT BED CAPACITY REMAINS AVAILABLE)	
San Diego Rehabilitation Institute	North San Diego

A further analysis of the 193 contract terminations occurring since February 1, 1983, demonstrates the relatively minor effect such terminations have had on access. Seventy of the 193 terminations were hospitals that either closed their doors or converted to some use other than general acute care. Nineteen merged or consolidated with other contracting hospitals. Fifty-eight of the remaining 105 hospitals have recontracted, and 17 of the balance are mostly in rural HFPAs that are now "open" to cost-based payments. The net effect has been that only 29 of the 193 terminations, or about 15.0%, occurred for hospitals that continue to provide acute care services to the general public and are not now available to Medi-Cal beneficiaries except in emergency situations.

SERVICE CAPACITY AVAILABLE TO MEET NEED

Table 2 presents data showing the percent of Medi-Cal area need under contract. The table depicts inpatient hospital bed capacity under contract as a percentage of the area bed need required to assure Medi-Cal beneficiaries access to inpatient services under the Selective Provider Contracting Program. The data is for calendar year 2000. The data indicates, with the exception of two specific instances (involving burn center services), that sufficient bed capacity was available in contracting hospitals to meet the inpatient hospitalization needs of Medi-Cal beneficiaries for all services, in all geographic areas. For the two exceptions involving the availability of burn center services, Medi-Cal beneficiaries in the two affected areas have access to all of the burn center service capacity that exists within their respective areas.

The Commission takes into consideration trends with respect to inpatient utilization, changes in the availability of licensed bed services, e.g., neonatal intensive care, mergers and consolidations of hospitals, and the effect of managed care, both in general and, specifically, for Medi-Cal beneficiaries being served under the Selective Provider Contracting Program. Although there has been a slight decrease in the number of contracting hospitals in recent years, there has been no significant change in the number of beds available under the program because most of the hospitals that have left the contracting program have been small, rural hospitals. During the years when there was a significant expansion of Medi-Cal enrollments into managed care programs, there was a corresponding decline in total contracting days. For the past several years, the shift to managed care has stabilized along with the number of contracting days. The shift towards rendering services in an outpatient setting is also a factor in reducing the number of contracting days. The net result of all these changes has created additional inpatient bed capacity available to serve Medi-Cal beneficiaries in contracting hospitals.

TABLE 2

**PERCENT OF 2000 MEDI-CAL AREA NEED
UNDER CONTRACT**

AREA	TOTAL	MS/ICU	OB	NICU	PED	REHAB	BURN
STATEWIDE	527%	669%	316%	225%	398%	938%	663%
SACRAMENTO	371%	471%	361%	135%	172%	763%	175%
SAN FRANCISCO BAY	642%	808%	365%	258%	545%	519%	981%
SAN JOAQUIN VALLEY	482%	568%	346%	231%	614%	906%	574%
COASTAL	781%	1177%	307%	248%	830%	3555%	N/A
LOS ANGELES COUNTY	479%	587%	265%	221%	398%	1509%	1235%
ORANGE COUNTY	887%	1903%	341%	318%	320%	4207%	481%
RIVERSIDE/SAN BERNARDINO	427%	643%	263%	122%	288%	380%	191%
SAN DIEGO COUNTY	617%	697%	639%	380%	314%	797%	59%
Service Codes: MS/ICU Medical-Surgical & Intensive Care OB Obstetrics NICU Neonatal Intensive Care Unit PED Pediatrics REHAB Acute Rehabilitation BURN Burn Center							

This chart shows that the statewide total for vacant licensed beds under SPCP contract was 527% greater than the Medi-Cal patient caseload required in 2000. The licensed beds and non-Medi-Cal patient caseload data was collected from the 2000 Annual Report of Hospitals as published by the Office of Statewide Health Planning and Development; the most recent and complete report at the time this table was developed. Medi-Cal patient caseload data for 2000 was used in order to be comparable with the information reported in the 2000 Annual Report of Hospitals.

The data for Orange County is skewed because most of the Medi-Cal eligibles are enrolled in the CalOptima County Organized Health System, and therefore, are not subject to the SPCP waiver. The few remaining eligibles falling under the SPCP waiver greatly distort the Orange County percentages which are based on total available bed days under contract divided by the very few SPCP days provided in the County. The data shows that there is insufficient bed capacity for burn days in San Diego County. Since all the licensed burn beds in San Diego County are under contract, the SPCP waiver is compliant with federal requirements.

MEDI-CAL INPATIENT EXPENDITURES AND UTILIZATION

All days and dollars cited in this section are estimates for services provided in fiscal year 2000/01 based on fee-for-service payments made by the State's fiscal intermediary. Statewide, fee-for-service Medi-Cal expenditures for inpatient general acute care hospital services provided in fiscal year 2000/01 were approximately \$2.33 billion in State and federal funds. Of this amount, approximately \$2.02 billion, or 86.7%, was paid to SPCP hospitals. Payments to all other hospitals in open areas and non-contract hospitals in closed areas accounted for 13.3%.

In fiscal year 2000/01, the Medi-Cal program purchased approximately 2.10 million days of inpatient hospital acute care at contract and non-contract hospitals; unchanged from 2.10 million days in the previous fiscal year. The distribution of patient days among hospitals mirrors the expenditure figures. Contract hospitals provided approximately 1.91 million patient days of care in fiscal year 2000/01, representing 91.0% of the total inpatient acute care days provided to Medi-Cal beneficiaries. Open areas and non-contract hospitals in closed areas provided the remaining 9.0%.

ANALYSIS OF FISCAL IMPACT OF CONTRACTING PROGRAM

The implementation of the Selective Provider Contracting Program has generated substantial savings from cost-based reimbursement. These savings have increased from roughly \$200 million per annum during the early years of the program to the current estimate of \$1.31 billion.

For nearly nineteen years, the fiscal impact of contracting has been monitored by comparing negotiated contract rates with estimates of what would have been paid under the cost-based reimbursement system. The Audits and Investigations Branch of DHS compiles data on Medi-Cal allowable costs and utilization as reported by each hospital for every fiscal year. This information is used to calculate allowable costs per day for each hospital. This figure is then adjusted by statewide inpatient inflation factors to arrive at a benchmark rate for each hospital.

These per day benchmark rates for contracting hospitals are then compared to actual CMAC negotiated rates. The number of days of service rendered by each hospital is multiplied by both the benchmark and the negotiated rate. The latter is subtracted from the former to show the SPCP savings estimate for each

hospital. The result of adding the savings figures for all hospitals under contract as of December 1, 2001, is a projected SPCP expenditure estimated to be \$1.31 billion less than the total benchmark expenditure estimate for the year.

It is difficult to identify the amount of savings produced by the SPCP with absolute certainty because it is difficult to accurately project what each of the 236 contracting hospitals would have received if the SPCP were discontinued and each hospital were to return to the cost-based reimbursement system. In addition, adjustments must be made to reflect other program features (discussed below). Thus, while the Commission continues to calculate SPCP savings figures, the Commission is reluctant to precisely represent any particular figure as the program savings for a particular year. The Commission's current best estimate for fiscal year 2001/02, however, is a net savings amount of approximately \$318 million.

Adjustments to SPCP Savings Estimates

The above method of estimating SPCP savings compares rate payments paid to hospitals through CMAC negotiated rates with the rates hospitals would be paid in the absence of the SPCP under the alternative cost-based reimbursement system. There are four additional hospital financing programs in California, which also must be considered in determining total SPCP savings.

SB 1255 - Welfare and Institutions Code Section 14085.6 provides for the Emergency Services and Supplemental Payments (ESSP) Fund commonly known as the *SB 1255* program. This fund is designed to receive voluntary transfers from public sources, including available federal matching funds, for distribution to eligible hospitals through negotiations with the Commission. To be eligible to negotiate for distributions from the ESSP fund, a hospital must be:

- 1) a Medi-Cal SPCP contract hospital;
- 2) a disproportionate share provider based on requirements specified in State statute and the California State Medicaid Plan; and
- 3) a licensed provider of basic or comprehensive emergency medical services (or a children's hospital which provides such emergency services in conjunction with another licensed hospital), or meet other requirements as specified in state statute.

Approximately \$1.34 billion was negotiated for payment to qualifying 1255 hospitals during fiscal year 2001/02. Even though this fund does not include expenditures from the State's General Fund, such payments must still be subtracted from SPCP savings as they involve payments for Medi-Cal inpatient care through SPCP.

SB 1732 - The SB 1732 program, the Construction and Renovation Reimbursement Program, mandated by Welfare and Institutions Code Section 14085.5, also involves additional payments to disproportionate share hospitals. In this program, the additional payments relate to the costs of capital construction. While the SB 1732 program is administered by the Department of Health Services, the payment authority is incorporated into SPCP's hospital contracts. Thus, these additional expenditures must be subtracted from what would otherwise amount to SPCP savings. During fiscal year 2000/01, additional payments to hospitals as a result of the SB 1732 program are estimated by DHS to be nearly \$159 million.

AB 761 - The Small and Rural Hospital Supplemental Payment Program, mandated by Chapter 226, Statutes of 1999, added Section 14085.9 to the Welfare and Institutions Code. This Fund was established to provide supplemental reimbursement to small and rural hospitals with standby emergency rooms that could not qualify for reimbursement under the Emergency Services and Supplemental Payments Fund (SB 1255).

Medical Education Funds - Sections 14085.7 and 14085.8 were added to the Welfare and Institutions Code in the mid 1990s to create two new supplemental payment funds in support of medical education. The purpose of such funds is to recognize medical education costs associated with health care services rendered to Medi-Cal beneficiaries. Much like the SB 1255 fund, the Medi-Cal Medical Education Supplemental Payment Fund and the Medi-Cal Large Teaching Emphasis Hospital and Children's Hospital Medical Education Supplemental Payment Fund are financed through intergovernmental transfers or other federally permissible donations and then matched with federal Medicaid funds. Payments from these two funds to the eligible hospitals are negotiated between the Commission and contracting hospitals that meet other criteria prescribed in statute, providing that such funds have available monies. Contracting hospitals that meet the definition of university teaching hospitals or major (non-university) teaching hospitals contained in the Department of Health Services' report dated May 1991, entitled "Hospital Peer Grouping" are eligible to negotiate for monies from the Medi-Cal Medical Education Supplemental Payment Fund. Contracting hospitals that are either: 1) a large teaching emphasis hospital, as defined in the Department of Health Services' report dated May 1991, entitled "Hospital Peer Grouping", or 2) a children's hospital pursuant to W&I Code, Section 10727; and meet the definition of an eligible hospital as defined in paragraph (3) of

subdivision (a) of Section 14105.98 of the W&I Code are eligible to negotiate for monies from the Medi-Cal Large Teaching Emphasis Hospital and Children's Hospital Medical Education Supplemental Payment Fund. During fiscal year 2001/02, additional payments to hospitals qualifying for Medical Education payments were approximately \$159.4 million.

Managed Care Savings - There are additional SPCP savings for inpatient days that have shifted from the fee-for-service program to the Medi-Cal managed care programs that are attributable to SPCP activities. The lower SPCP per diem contract rates create the fee-for-service cost basis used to establish the Managed Care Upper Payment Limits. Thus, the SPCP Waiver should continue to receive credit for the savings achieved on every fee-for-service inpatient day that has shifted to Medi-Cal managed care.

Thus, the combined net result of all activities attributable to the SPCP waiver is displayed as follows:

TABLE 3
SELECTIVE PROVIDER CONTRACTING PROGRAM
FY 2001/02 ESTIMATED SAVINGS

(IN \$1,000s)

1 SPCP Savings	2 SB 1255	3 SB 1732	4 AB 761	5 Medical Education Waiver	6 Managed Care Savings	7 Total Savings
\$1,310,268	\$1,344,715	\$159,354	\$0	\$159,350	\$672,000	\$318,849
Column	Notes					
1	Assumes benchmark savings at FY 2001/02 level.					
2	Total SB 1255 gross expenditures.					
3	Total SB 1732 expenditures as of May 2002.					
4	Total AB 761 gross expenditures.					
5	Total Medical Education Fund gross expenditures.					
6	Estimated Managed Care Savings due to SPCP activities.					
7	Total Savings = SPCP Savings (Column 1) minus all SB 1255 expenditures (Column 2) minus all SB 1732 expenditures (Column 3) minus AB 761 expenditures (Column 4) minus all Medical Education expenditures (Column 5) plus managed care savings (Column 6).					

AVERAGE PAYMENT RATE CHANGES

The average per day reimbursement received by the 236 general acute care hospitals with Medi-Cal contracts on December 1, 2001 was \$957. The overall increase in the statewide average resulted from the combination of the following effects during the twelve-month period:

- 127 Contract hospitals received a net increase in rates;
- 2 Contract hospitals experienced a net decrease in rates;
- 0 Hospitals began contracting for the first time;
- 12 General acute care hospital contracts were terminated; and
- 0 Hospitals recontracted.

As of December 1, 2001, 3 hospitals had contracted for an all-inclusive per discharge rate and 13 other hospitals had a rate structure that included a separate discharge rate for obstetrical services.

Table 4 displays average contract rates by region and hospital size for calendar years 1984 through 2001. These numbers represent the average rate paid under contract as of December 1 for each year reported. The average rate a contract hospital receives has increased 86.6% from 1984 through 2001, or approximately 3.5% per year on a compound basis. This is in contrast to the historical change in the average payment rate to non-contracting hospitals. Under the cost-based reimbursement system the average payment rate from 1984 to 2001 has increased 130.0% or approximately 4.74% per year on a compound basis.

AS OF DECEMBER 1

Standard Consolidated Statistical Areas

Southern California = Counties of Los Angeles, Orange, Riverside, San Bernardino and Ventura

San Francisco Bay Area= Counties of Alameda, Contra Costa, Marin, Napa, San Francisco, San Mateo, Santa Clara, Solano and Sonoma

Other Areas = All other counties not included in the other two areas.

Sources: CMAC Management Information System and OSHPD Licensing File System

CONCLUSION

After 19 years of operations, the Selective Provider Contracting Program continues to ensure access to hospital inpatient services to Medi-Cal beneficiaries. Additionally, and importantly, the program remains a cost-effective program for delivering and paying for hospital inpatient services. The SPCP has realized in fiscal year 2001/02 estimated program savings of \$1.31 billion as a result of negotiating inpatient per diem rates of reimbursement to 236 hospitals. After taking into account all payment considerations authorized under the waiver, net savings for the year is estimated at \$318 million.

APPENDIX A

**Contracting Status of HFPAs as of
December 1, 2001**

APPENDIX A

CONTRACTING STATUS OF HFPAs AS OF DECEMBER 1, 2001

HFPA	AREA	AREA STATUS	CLOSURE DATE	REOPEN DATE	RECLOSURE DATE
101	CRESCENT CITY	OPEN			
103	HOOPA	OPEN			
105	EUREKA	OPEN			
107	FORTUNA	OPEN			
109	GARBERVILLE	OPEN			
111	FORT BRAGG	OPEN			
112	WILLITS	OPEN			
113	UKIAH	OPEN			
115	LAKEPORT	OPEN			
201	ALTURAS	OPEN			
203	YREKA	OPEN			
205	MOUNT SHASTA	OPEN			
207	WEAVERVILLE	OPEN			
209	REDDING	OPEN	1-Jun-84	1-Jul-89	
210	FALL RIVER MILLS	OPEN			
211	RED BLUFF	OPEN			
213	SUSANVILLE	OPEN	1-Aug-83	27-Aug-96	
215	QUINCY	OPEN			
217	PORTOLA	OPEN			
219	CHICO	OPEN	1-Sep-84	1-Jul-89	
220	PARADISE	OPEN			
221	OROVILLE	OPEN			
223	WILLOWS	OPEN			
225	COLUSA	OPEN			
227	MARYSVILLE	OPEN			
300	LOYALTON	OPEN			
301	NEVADA CITY	OPEN			
302	NORTH LAKE TAHOE	OPEN			
304	PLACERVILLE	OPEN			
306	SOUTH LAKE TAHOE	OPEN			
308	AUBURN	OPEN			
309	ROSEVILLE	CLOSED	1-Jul-83		
311	SACRAMENTO	CLOSED	1-Feb-83		
313	WOODLAND	CLOSED	1-Jun-83		
401	SANTA ROSA	OPEN			
403	PETALUMA	OPEN			
405	SAN RAFAEL	CLOSED	1-Jul-83		
407	NAPA	OPEN			
408	FAIRFIELD	OPEN	1-Aug-83	1-Aug-85	
409	VALLEJO	OPEN			
411	CONCORD	CLOSED	1-Jul-83		
413	RICHMOND	CLOSED	1-Jul-83		
415	BERKELEY	CLOSED	1-Mar-83		

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CONTRACTING STATUS OF HFPAs AS OF DECEMBER 1, 2001

HFPA	AREA	AREA STATUS	CLOSURE DATE	REOPEN DATE	RECLOSURE DATE
417	OAKLAND	CLOSED	1-Mar-83		
419	LIVERMORE	OPEN			
421	HAYWARD	CLOSED	1-Mar-83		
423	SAN FRANCISCO	CLOSED	1-Feb-83		
425	DALY CITY	CLOSED	1-Feb-83		
427	SAN MATEO	OPEN			
428	REDWOOD CITY	CLOSED	1-Mar-83		
429	PALO ALTO	CLOSED	1-Mar-83		
431	SAN JOSE	CLOSED	1-Mar-83		
433	GILROY	OPEN			
501	JACKSON	OPEN			
503	SAN ANDREAS	OPEN			
505	LODI	CLOSED	1-Jul-83		
507	STOCKTON	CLOSED	1-Aug-87		
509	TRACY	CLOSED	1-Jul-83		
511	MODESTO	CLOSED	1-Jun-83		
513	SONORA	CLOSED	1-Jun-83		
515	MERCED	CLOSED	1-Jun-83		
516	TURLOCK	CLOSED	1-Jun-83		
517	LOS BANOS	OPEN	1-Jun-83	9-Aug-01	
601	MADERA	CLOSED	1-Jul-83		
603	MARIPOSA	OPEN			
605	FRESNO	CLOSED	1-Jul-83		
607	REEDLEY	OPEN	1-Jun-83	1-Jul-01	
608	DINUBA	OPEN	1-Jun-83	9-Mar-00	
609	COALINGA	OPEN			
611	VISALIA	OPEN			
613	PORTERVILLE	OPEN			
615	HANFORD	OPEN			
617	BAKERSFIELD	CLOSED	1-Aug-83		
619	KERN RIVER VALLEY	OPEN			
621	RIDGECREST	OPEN			
623	TEHACHAPI	OPEN			
625	TAFT	OPEN			
701	HOLLISTER	OPEN			
703	SANTA CRUZ	CLOSED	1-Jun-83		
705	SALINAS	OPEN	1-Jul-86	1-Feb-90	
707	MONTEREY	OPEN	1-Jan-86	1-Feb-90	
709	KING CITY	OPEN	1-Jul-86	1-Jul-89	
711	WATSONVILLE	OPEN	27-Nov-85	23-Mar-93	
801	SAN LUIS OBISPO	CLOSED	1-Jun-83		
803	SANTA MARIA	OPEN			
805	LOMPOC	OPEN			

APPENDIX A

CONTRACTING STATUS OF HFPAs AS OF DECEMBER 1, 2001

HFPA	AREA	AREA STATUS	CLOSURE DATE	REOPEN DATE	RECLOSURE DATE
807	SANTA BARBARA	OPEN			
809	VENTURA	CLOSED	1-Jul-83		
811	OXNARD	CLOSED	1-Jul-83		
901	LANCASTER	CLOSED	1-Jul-83		
903	SAN FERNANDO	CLOSED	1-Apr-83		
905	VAN NUYS	CLOSED	1-Apr-83		
907	BURBANK	CLOSED	1-Apr-83		
909	GLENDALE	CLOSED	1-Apr-83		
911	PASADENA	CLOSED	1-Apr-83		
913	WEST SAN GABRIEL	CLOSED	1-Apr-83		
915	EAST SAN GABRIEL	CLOSED	1-Apr-83		
917	POMONA	CLOSED	1-Apr-83		
919	WHITTIER	CLOSED	1-Apr-83		
921	DOWNEY-NORWALK	CLOSED	1-Apr-83		
923	LYNWOOD	CLOSED	1-Feb-83		
925	LOS ANGELES	CLOSED	1-Apr-83		
927	SANTA MONICA	CLOSED	1-Apr-83		
929	INGLEWOOD	CLOSED	1-Jan-85	1-Feb-86	1-Jun-92
931	TORRANCE	CLOSED	15-Aug-84	1-Feb-90	24-May-94
933	LONG BEACH	CLOSED	1-Feb-83		
935	WATTS	CLOSED	1-Apr-83		
937	LA CANADA	CLOSED	1-Apr-83		
1011	FULLERTON	CLOSED	1-Nov-84		
1012	ANAHEIM	CLOSED	1-May-83		
1013	BUENA PARK	CLOSED	1-May-83		
1014	HUNTINGTON BEACH	OPEN	1-May-83	17-Nov-90	
1015	SANTA ANA	CLOSED	1-May-83		
1016	NEWPORT BEACH	OPEN			
1017	SOUTH ORANGE	OPEN			
1101	BLYTHE	OPEN			
1103	INDIO	CLOSED	11-Jul-95		
1105	PALM SPRINGS	CLOSED	1-Jul-83		
1107	BANNING	CLOSED	1-Aug-83		
1109	HEMET	CLOSED	1-Jul-83		
1111	RIVERSIDE	CLOSED	1-Jul-83		
1201	SOUTHERN INYO	OPEN			
1203	NORTHERN INYO	OPEN			
1205	MONO COUNTY	OPEN			
1207	W. SAN BERNARDINO	CLOSED	1-Jul-83		
1209	SAN BERNARDINO	CLOSED	1-Jun-83		
1211	VICTOR VALLEY	OPEN			
1213	BARSTOW	OPEN			
1214	MORONGO BASIN	OPEN			

APPENDIX A

CONTRACTING STATUS OF HFPAs AS OF DECEMBER 1, 2001

HFPA	AREA	AREA STATUS	CLOSURE DATE	REOPEN DATE	RECLOSURE DATE
1215	NEEDLES	OPEN			
1217	BEAR VALLEY	OPEN			
1412	INLND N. SAN DIEGO CO	CLOSED	1-Apr-83		
1414	CSTAL N. SAN DIEGO CO	CLOSED	1-Apr-83		
1416	NORTH SAN DIEGO CITY	CLOSED	1-Jul-83		
1418	CNTRL SAN DIEGO CITY	CLOSED	1-Feb-83		
1420	SOUTH SAN DIEGO CO	CLOSED	1-Feb-83		
1422	EAST SAN DIEGO CO	CLOSED	1-Feb-83		
1424	IMPERIAL COUNTY	OPEN			

SOURCE: California Medica Assistance Commission Management Information System

APPENDIX B

**Medi-Cal Hospital Contracting Status
as of December 1, 2001**

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
ROSEVILLE	309	950	C		MERCY SAN JUAN HOSPITAL
		1000	C		SUTTER ROSEVILLE MEDICAL CENTER
		4029	C		MERCY HOSPITAL OF FOLSOM
		4035		NC	KINDRED HOSPITAL - SACRAMENTO
		TOTAL	3	1	
SACRAMENTO	311	913		NC	KAISER FOUNDATION HOSPITAL-SACRAMENTO
		947	C		MERCY GENERAL HOSPITAL
		951	C		METHODIST HOSPITAL OF SACRAMENTO
		1006	C		UC DAVIS MEDICAL CENTER
		1051	C		SUTTER COMMUNITY HOSPITALS OF SACRAMENTO (2 Service Sites)
		2344		NC	KAISER FOUNDATION HOSPITAL-S. SACRAMENTO
		4114		NC	SHRINERS HOSPITAL
		TOTAL	4	3	
WOODLAND	313	1086		NC	WOODLAND MEMORIAL HOSPITAL
		4010	C		SUTTER DAVIS HOSPITAL
		TOTAL	1	1	
SAN RAFAEL	405	992		NC	KAISER FOUNDATION HOSPITAL - SAN RAFAEL
		993	C		KENTFIELD REHABILITATION HOSPITAL
		1006	C		MARIN GENERAL HOSPITAL
		4035	C		NOVATO COMMUNITY HOSPITAL
		TOTAL	3	1	
CONCORD	411	924	C		CONTRA COSTA REGIONAL MEDICAL CENTER
		934		NC	SUTTER DELTA MEDICAL CENTER
		988		NC	JOHN MUIR MEMORIAL HOSPITAL
		990		NC	KAISER FOUNDATION HOSPITAL - WALNUT CREEK
		1018	C		MT. DIABLO MEDICAL CENTER
		4011	C		GOLDEN STATE REHABILITATION HOSPITAL
		4017		NC	SAN RAMON REGIONAL MEDICAL CENTER
		TOTAL	3	4	
RICHMOND	413	904	C		DOCTORS MEDICAL CENTER - SAN PABLO
		991		NC	KAISER FOUNDATION HOSPITAL - RICHMOND
		TOTAL	1	1	
BERKELEY	415	739	C		ALTA BATES MEDICAL CENTER (2 Service Sites)
		TOTAL	1	0	

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
OAKLAND	417	735	C		ALAMEDA HOSPITAL
		776	C		CHILDREN'S HOSPITAL MED CENTER OF N. CALIFORNIA
		846	C		<u>ALAMEDA CO. MEDICAL CENTER-HIGHLAND</u>
		856		NC	KAISER FOUNDATION HOSPITAL - OAKLAND
		937	C		<u>SUMMIT MEDICAL CENTER (2 Service Sites)</u>
		TOTAL	=====	=====	
			4	1	
		805	C		<u>EDEN MEDICAL CENTER (2 Service Sites)</u>
		811	C		<u>ALAMEDA CO. MEDICAL CENTER-FAIRMONT</u>
		858		NC	KAISER FOUNDATION HOSPITAL - HAYWARD
HAYWARD	421	869		NC	LAUREL GROVE HOSPITAL
		887		NC	KINDRED-S.F. BAY AREA
		967	C		ST. ROSE HOSPITAL
		987	C		WASHINGTON HOSPITAL - FREMONT
		3619		NC	COLUMBIA SAN LEANDRO HOSPITAL
		4132		NC	KAISER FOUNDATION HOSPITAL - FREMONT
		TOTAL	=====	=====	
			4	4	
		816		NC	KAISER FOUNDATION HOSPITAL - FRENCH CAMPUS
		857		NC	KAISER FOUNDATION HOSPITAL - SAN FRANCISCO
SAN FRANCISCO	423	865		NC	LAGUNA HONDA HOSPITAL & REHABILITATION CENTER
		929	C		<u>CALIFORNIA PACIFIC MEDICAL CENTER (3 Service Sites)</u>
		933	C		<u>DAVIES MEDICAL CENTER</u>
		939	C		SAN FRANCISCO GENERAL HOSPITAL MEDICAL CTR
		960	C		ST. FRANCIS MEMORIAL HOSPITAL
		964	C		ST. LUKE'S HOSPITAL
		965	C		ST. MARY'S HOSPITAL AND MEDICAL CENTER
		1154	C		<u>UCSF HOSPS & CLINICS & MT ZION MEDICAL CNTR</u>
					<u>OF THE UCSF (2 Service Sites)</u>
		2715	C		CHINESE HOSPITAL
DALY CITY	425	TOTAL	=====	=====	
			8	3	
		806		NC	KAISER FOUNDATION HOSPITAL -S. SAN FRANCISCO
		817	C		SETON MEDICAL CENTER
		TOTAL	=====	=====	
			1	1	
		804		NC	KAISER FOUNDATION HOSPITAL - REDWOOD CITY
		891	C		SEQUIOA HOSPITAL
		4018		NC	RECOVERY INN OF MENLO PARK
		TOTAL	=====	=====	
REDWOOD CITY	428		1	2	
		763	C		EL CAMINO HOSPITAL OF MOUNTAIN VIEW
		805		NC	KAISER FOUNDATION HOSPITAL - SANTA CLARA
		905	C		UCSF STANFORD HEALTHCARE - STANFORD UNIVERSITY HOSP
		4040	C		LUCILE SALTER PACKARD CHILDREN'S HOSP. STANFORD
		TOTAL	=====	=====	
			3	1	
		763	C		EL CAMINO HOSPITAL OF MOUNTAIN VIEW
		805		NC	KAISER FOUNDATION HOSPITAL - SANTA CLARA
		905	C		UCSF STANFORD HEALTHCARE - STANFORD UNIVERSITY HOSP
PALO ALTO	429	4040	C		LUCILE SALTER PACKARD CHILDREN'S HOSP. STANFORD
		TOTAL	=====	=====	
			3	1	

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
SAN JOSE	431				
		705	C		ALEXIAN BROTHERS HOSPITAL
		743	C		COMMUNITY HOSPITAL & REHABILITATION CENTER OF LOS GATOS-SARATOGA
		779	C		GOOD SAMARITAN HOSPITAL OF SANTA CLARA VALLEY
		837	C		O'CONNOR HOSPITAL
		879	C		SAN JOSE MEDICAL CENTER
		883	C		SANTA CLARA VALLEY MEDICAL CENTER
		1506		NC	SANTA TERESA COMMUNITY HOSPITAL
		4051		NC	CHILDREN'S RECOVERY CENTER
			=====	=====	
		TOTAL	6	2	
LODI	505				
		923	C		LODI MEMORIAL HOSPITAL (2 Service Sites)
			=====	=====	
		TOTAL	1	0	
STOCKTON	507				
		846	C		DAMERON HOSPITAL
		1010	C		SAN JOAQUIN GENERAL HOSPITAL
		1042	C		ST. JOSEPH'S MEDICAL CENTER OF STOCKTON
		2287	C		DOCTORS HOSPITAL OF MANTECA
		4009	C		ST. DOMINIC'S HOSPITAL
			=====	=====	
		TOTAL	5	0	
TRACY	509				
		1056	C		SUTTER TRACY COMMUNITY HOSPITAL
			=====	=====	
		TOTAL	1	0	
MODESTO	511				
		852	C		DOCTOR'S MEDICAL CENTER
		939	C		MEMORIAL HOSPITAL MEDICAL CENTER - MODESTO
		954	C		CENTRAL CALIFORNIA REHABILITATION HOSPITAL
		967	C		OAK VALLEY DISTRICT HOSPITAL
		4038		NC	STANISLAUS SURGICAL
			=====	=====	
		TOTAL	4	1	
SONORA	513				
		1034		NC	SONORA COMMUNITY HOSPITAL
		1061	C		TUOLUMNE GENERAL HOSPITAL
			=====	=====	
		TOTAL	1	1	
MERCED	515				
		942	C		MERCY MEDICAL CENTER MERCED-COMMUNITY CAMPUS
		948	C		MERCY HOSPITAL
			=====	=====	
		TOTAL	2	0	
TURLOCK	516				
		867	C		EMANUEL MEDICAL CENTER
			=====	=====	
		TOTAL	1	0	
LOS BANOS	517				
		853	C		DOS PALOS MEMORIAL HOSPITAL
		924		NC	MEMORIAL HOSPITAL OF LOS BANOS
			=====	=====	
		TOTAL	1	1	

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
MADERA	601	692	C		CHOWCHILLA DISTRICT MEMORIAL HOSPITAL
		1281		NC	MADERA COMMUNITY HOSPITAL
		4019	C		VALLEY CHILDREN'S HOSP & GUIDANCE CLINIC
		=====	=====	=====	
		TOTAL	2	1	
FRESNO	605	717	C		<u>FRESNO COMMUNITY HOSPITAL & MED CENTER</u>
		822	C		<u>UNIVERSITY MEDICAL CENTER</u>
		899	C		ST. AGNES MEDICAL CENTER
		4016	C		CLOVIS COMMUNITY HOSPITAL
		4023	C		SAN JOAQUIN VALLEY REHABILITATION HOSPITAL
		4047		NC	FRESNO SURGERY CENTER
		4062		NC	KAISER FOUNDATION HOSPITAL-FRESNO
		=====	=====	=====	
		TOTAL	5	2	
BAKERSFIELD	617	706	C		DELANO REGIONAL MEDICAL CENTER
		722		NC	BAKERSFIELD MEMORIAL HOSPITAL
		736	C		KERN MEDICAL CENTER
		761		NC	MERCY HOSPITAL - BAKERSFIELD
		775	C		GOOD SAMARITAN HOSPITAL
		788	C		SAN JOAQUIN COMMUNITY HOSPITAL
		4022	C		HEALTHSOUTH BAKERSFIELD REHABILITATION HOSPITAL
		4101		NC	BAKERSFIELD HEART HOSPITAL
		=====	=====	=====	
SANTA CRUZ	703	755	C		<u>DOMINICAN SANTA CRUZ HOSPITAL (2 Service Sites)</u>
		4012		NC	SUTTER MATERNITY & SURGERY CENTER
		=====	=====	=====	
SALINAS	705	4043	C		NATIVIDAD MEDICAL CENTER
		875	C		SALINAS VALLEY MEMORIAL HOSPITAL
		=====	=====	=====	
SAN LUIS OBISPO	801	466	C		ARROYO GRANDE COMMUNITY HOSPITAL
		480	C		FRENCH HOSPITAL MEDICAL CENTER
		511	C		SAN LUIS OBISPO GENERAL HOSPITAL
		524	C		AMI SIERRA VISTA REGIONAL MEDICAL CENTER
		548	C		TWIN CITIES COMMUNITY HOSPITAL
		=====	=====	=====	
VENTURA	809	473	C		COMMUNITY MEMORIAL HOSPITAL OF SAN BUENAVENTURA
		481	C		VENTURA COUNTY MEDICAL CENTER
		501	C		OJAI VALLEY COMMUNITY HOSPITAL
		521	C		SANTA PAULA MEMORIAL HOSPITAL
		=====	=====	=====	
MADERA	601	=====	=====	=====	
		TOTAL	4	0	

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
OXNARD	811	492	C		LOS ROBLES REGIONAL MEDICAL CENTER (2 service sites)
		508	C		ST. JOHN'S PLEASANT VALLEY HOSPITAL
		525	C		SIMI VALLEY HOSPITAL & HEALTH CARE CENTER
		529	C		ST. JOHN'S REGIONAL MEDICAL CENTER
		TOTAL	4	0	
LANCASTER	901	34	C		ANTELOPE VALLEY HOSPITAL MEDICAL CENTER
		455		NC	LANCASTER COMMUNITY HOSPITAL
		1261	C		<u>LOS ANGELES CO. HIGH DESERT HOSPITAL</u>
		TOTAL	2	1	
SAN FERNANDO	903	348	C		GRANADA HILLS COMMUNITY HOSPITAL
		385	C		PROVIDENCE HOLY CROSS MEDICAL CENTER
		949	C		HENRY MAYO NEWHALL MEMORIAL HOSPITAL
		1231	C		<u>LOS ANGELES CO. OLIVE VIEW MEDICAL CENTER</u>
		TOTAL	4	0	
VAN NUYS	905	432		NC	KAISER FOUNDATION HOSPITAL - PANORAMA CITY
		517	C		<u>ENCINO-TARZANA REGIONAL MEDICAL CENTER (2 Service Sites)</u>
		524	C		MISSION COMMUNITY HOSPITAL
		552	C		MOTION PICTURE & TELEVISION HOSPITAL
		568	C		NORTHRIDGE HOSPITAL MEDICAL CTR-ROSCOE BLVD.
		708	C		SHERMAN OAKS HOSPITAL AND HEALTH CENTER
		810	C		NORTHRIDGE HOSPITAL MEDICAL CTR-SHERMAN WAY
		812	C		VALLEY PRESBYTERIAN HOSPITAL
		814		NC	HOLLYWOOD COMMUNITY HOSPITAL OF VAN NUYS
		859		NC	WEST HILLS MEDICAL CENTER
		1450		NC	KAISER FOUNDATION HOSPITAL - WOODLAND HILLS
		TOTAL	7	4	
BURBANK	907	696	C		PACIFICA HOSPITAL OF THE VALLEY
		758	C		PROVIDENCE ST. JOSEPH MEDICAL CENTER
		TOTAL	2	0	
GLENDALE	909	323	C		GLENDALE ADVENTIST MED CNTR WILSON TERRACE
		522	C		GLENDALE MEMORIAL HOSPITAL & HEALTH CENTER
		TOTAL	2	0	
PASADENA	911	400	C		HUNTINGTON MEMORIAL HOSPITAL
		759	C		ST. LUKE MEDICAL CENTER
		TOTAL	2	0	

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
WEST SAN GABRIEL	913		17	C	ALHAMBRA HOSPITAL
			176	C	CITY OF HOPE NATIONAL MEDICAL CENTER
			200	C	SAN GABRIEL VALLEY MEDICAL CENTER
			315	C	GARFIELD MEDICAL CENTER
			352	C	GREATER EL MONTE COMMUNITY HOSPITAL
			529	C	METHODIST HOSPITAL OF SOUTHERN CALIFORNIA
			541	C	MONROVIA COMMUNITY HOSPITAL
			547	C	MONTEREY PARK HOSPITAL
			691	C	SANTA TERESITA HOSPITAL
			=====		
		TOTAL	9	0	
EAST SAN GABRIEL	915		298	C	FOOTHILL PRESBYTERIAN HOSPITAL
			328	C	HUNTINGTON EAST VALLEY HOSPITAL
			413	C	<u>CITRUS VALLEY MEDICAL CENTER - INTERCOMMUNITY</u>
			458	NC	SPECIALTY HOSPITAL OF SOUTHERN CALIFORNIA-SAN GABRIEL
			636	C	<u>CITRUS VALLEY MEDICAL CENTER - QUEEN OF THE VALLEY</u>
			857	C	DOCTORS HOSPITAL OF WEST COVINA
			6035	NC	KAISER FOUNDATION HOSPITAL - BALDWIN PARK
			=====		
		TOTAL	5	2	
POMONA	917		137	C	CASA COLINA HOSP FOR REHABILITATIVE MEDICINE
			630	C	POMONA VALLEY COMMUNITY HOSPITAL
			673	C	SAN DIMAS COMMUNITY HOSPITAL
			=====		
		TOTAL	3	0	
WHITTIER	919		81	C	BEVERLY HOSPITAL
			631	C	PRESBYTERIAN INTERCOMMUNITY HOSPITAL
			883	C	WHITTIER HOSPITAL MEDICAL CENTER
			=====		
		TOTAL	3	0	
DOWNEY/NORWALK	921		66	C	BELLFLOWER MEDICAL CENTER
			69	C	BELLWOOD GENERAL HOSPITAL
			159	C	TRI CITY REGIONAL MEDICAL CENTER
			243	C	<u>DOWNEY COMMUNITY HOSPITAL (2 Service Sites)</u>
			430	NC	KAISER FOUNDATION HOSPITAL - BELLFLOWER
			449	NC	SPECIALTY HOSPITAL OF SOUTHERN CALIFORNIA
			599	C	SUBURBAN MEDICAL CENTER
			766	C	COAST PLAZA DOCTORS HOSPITAL
			1306	C	<u>LOS ANGELES CO. RANCHO LOS AMIGOS MED CTR</u>
			=====		
		TOTAL	7	2	
LYNWOOD	923		197	C	<u>COMMUNITY AND MISSION HOSPITALS</u>
					<u>OF HUNTINGTON PARK (2 Service Sites)</u>
			754	C	ST. FRANCIS MEDICAL CENTER
			=====		
		TOTAL	2	0	

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL	
			Contract	Non-Contract		
LOS ANGELES	925		52	C	BARLOW HOSPITAL	
			125	C	CALIFORNIA MEDICAL CENTER - LOS ANGELES	
			170	C	CHILDREN'S HOSPITAL OF LOS ANGELES	
			198	C	LOS ANGELES COMMUNITY HOSPITAL (2 Service Sites)	
			256	C	EAST LOS ANGELES DOCTORS HOSPITAL	
			307	C	PACIFIC ALLIANCE MEDICAL CENTER	
			380	C	HOLLYWOOD COMMUNITY HOSPITAL OF HOLLYWOOD	
			382	C	QUEEN OF ANGELS/HOLLYWOOD PRESBY MED CTR	
			392	C	GOOD SAMARITAN HOSPITAL	
			429		NC	KAISER FOUNDATION HOSPITAL - LOS ANGELES
			468	C		LINCOLN HOSPITAL MEDICAL CENTER
			534		NC	MIDWAY HOSPITAL MEDICAL CENTER
			555	C		CEDARS SINAI MEDICAL CENTER
			581	C		ORTHOPAEDIC HOSPITAL
			661	C		CITY OF ANGELS MEDICAL CENTER - DOWNTOWN
			681	C		SAN VICENTE HOSPITAL
			685	C		SANTA MARTA HOSPITAL
			762	C		ST. VINCENT MEDICAL CENTER
			784	C		TEMPLE COMMUNITY HOSPITAL
			854	C		LOS ANGELES METROPOLITAN MEDICAL CENTER
			878	C		WHITE MEMORIAL MEDICAL CENTER
			1216	C		USC KENNETH NORRIS, JR. CANCER HOSPITAL
			1228	C		LOS ANGELES CO. USC MEDICAL CENTER
			4219	C		USC UNIVERSITY HOSPITAL
			=====	=====		
		TOTAL	22	2		
SANTA MONICA	927		110	C	BROTMAN MEDICAL CENTER	
			155	C	CENTURY CITY HOSPITAL	
			434		NC	KAISER FOUNDATION HOSPITAL - WEST LOS ANGELES
			500		NC	DANIEL FREEMAN MARINA HOSPITAL
			687	C		SANTA MONICA-UCLA MEDICAL CENTER
			756		NC	ST. JOHN'S HOSPITAL AND HEALTH CENTER
			796	C		UCLA MEDICAL CENTER
			=====	=====		
		TOTAL	4	3		
INGLEWOOD	929		148	C	CENTINELA HOSPITAL MEDICAL CENTER	
			196		NC	COMMUNITY HOSPITAL OF GARDENA
			230	C		DANIEL FREEMAN MEMORIAL HOSPITAL
			305	C		KINDRED HOSPITAL - LOS ANGELES
			366	C		ROBERT F. KENNEDY MEDICAL CENTER
			521	C		MEMORIAL HOSPITAL OF GARDENA
			=====	=====		
		TOTAL	5	1		
TORRANCE	931		422	C	TORRANCE MEMORIAL MEDICAL CENTER	
			470	C		LITTLE COMPANY OF MARY HOSPITAL
			=====	=====		
		TOTAL	2	0		
ask KAT if K covers both	933		45	C	AVALON MUNICIPAL HOSPITAL	
			53	C	ST. MARY MEDICAL CENTER	
			135		NC	KAISER FOUNDATION HOSPITAL - CARSON
			240	C		LAKEWOOD REGIONAL MEDICAL CENTER
			431		NC	KAISER FOUNDATION HOSPITAL - HARBOR CITY
			525	C		LONG BEACH MEMORIAL MEDICAL CENTER
			587	C		PACIFIC HOSPITAL OF LONG BEACH
			680	C		SAN PEDRO PENINSULA HOSPITAL (2 service sites)
			1227	C		LOS ANGELES CO. HARBOR/UCLA MEDICAL CENTER
			6168	C		MILLER CHILDREN'S HOSPITAL
			=====	=====		
		TOTAL	8	2		

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
		1230	C		<u>LOS ANGELES CO. M.L. KING JR./DREW MEDICAL CENTER</u>
		=====	=====	=====	
WATTS	935	TOTAL	1	0	
		818	C		VERDUGO HILLS HOSPITAL
		=====	=====	=====	
LA CANADA	937	TOTAL	1	0	
		1126		NC	BREA COMMUNITY HOSPITAL
		1127		NC	KINDRED HOSPITAL-BREA
		1132		NC	KAISER FOUNDATION HOSPITAL - ANAHEIM
		1297	C		PLACENTIA-LINDA COMMUNITY HOSPITAL
		1342	C		ST. JUDE MEDICAL CENTER
		=====	=====	=====	
FULLERTON	1011	TOTAL	2	3	
		1097	C		<u>ANAHEIM GENERAL HOSPITAL (2 Service Sites)</u>
		1098	C		ANAHEIM MEMORIAL MEDICAL CENTER
		1167		NC	SPECIALTY HOSPITAL OF SOUTHERN CALIFORNIA / SANTA ANA
		1188	C		WESTERN MEDICAL CENTER - ANAHEIM
		1283	C		GARDEN GROVE HOSPITAL AND MED CENTER
		1314	C		SANTA ANA HOSPITAL MEDICAL CENTER
		1379		NC	COLUMBIA WEST ANAHEIM MEDICAL CENTER
		=====	=====	=====	
ANAHEIM	1012	TOTAL	5	2	
		1234	C		LA PALMA INTERCOMMUNITY HOSPITAL
		1242		NC	ORANGE COUNTY COMMUNITY HOSPITAL-BUENA PARK
		1248	C		LOS ALAMITOS MEDICAL CENTER
		=====	=====	=====	
BUENA PARK	1013	TOTAL	2	1	
		225		NC	ORANGE COAST MEMORIAL
		1175		NC	FOUNTAIN VALLEY REGIONAL
		1209		NC	HUNTINGTON BEACH HOSPITAL
		1380	C		KINDRED HOSPITAL WESTMINSTER
		=====	=====	=====	
HUNTINGTON BEACH	1014	TOTAL	1	3	
		32	C		CHILDREN'S HOSPITAL OF ORANGE COUNTY
		1140	C		CHAPMAN GENERAL HOSPITAL
		1258	C		COASTAL COMMUNITIES HOSPITAL
		1279	C		U.C. IRVINE MEDICAL CENTER
		1340	C		ST. JOSEPH HOSPITAL - ORANGE
		1566	C		WESTERN MEDICAL CENTER - SANTA ANA
		4045		NC	IRVINE MEDICAL CENTER
		4079	C		TUSTIN REHABILITATION HOSPITAL
		4159	C		HEALTHBRIDGE CHILDREN'S REHABILITATION
		=====	=====	=====	
SANTA ANA	1015	TOTAL	8	1	
		1216	C		JOHN F. KENNEDY MEMORIAL HOSPITAL
		=====	=====	=====	
INDIO	1103	TOTAL	1	0	
		1164	C		DESERT HOSPITAL
		1168	C		EISENHOWER MEDICAL CENTER
		=====	=====	=====	
PALM SPRINGS	1105	TOTAL	2	0	

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
BANNING	1107	1326	C		SAN GORGONIO MEMORIAL HOSPITAL
		TOTAL	1	0	
		1194	C		HEMET VALLEY HOSPITAL
		2172		NC	VALLEY PLAZA HOSPITAL
		4001	C		INLAND VALLEY REGIONAL MEDICAL CENTER
HEMET	1109	4018	C		MENIFEE VALLEY MEDICAL CENTER
		4048	C		MORENO VALLEY MEDICAL CENTER
		4068	C		SHARP HEALTHCARE MURRIETA
		4487	C		RIVERSIDE COUNTY REGIONAL MEDICAL CENTER
		TOTAL	6	1	
		1152	C		CORONA REGIONAL MEDICAL CENTER
RIVERSIDE	1111	1293	C		PARKVIEW COMMUNITY HOSPITAL MED CENTER
		1312	C		RIVERSIDE COMMUNITY HOSPITAL
		4025		NC	KAISER FOUNDATION HOSPITAL- RIVERSIDE
		TOTAL	3	1	
		1144	C		CHINO VALLEY MEDICAL CENTER
WEST SAN BERNARDINO	1207	1166	C		U.S. FAMILYCARE MEDICAL CENTER
		1274		NC	KINDRED HOSPITAL - ONTARIO
		1318		NC	SAN ANTONIO COMMUNITY HOSPITAL
		TOTAL	2	2	
		1223		NC	KAISER FOUNDATION HOSPITAL - FONTANA
METRO SAN BERNARDINO	1209	1246	C		LOMA LINDA UNIVERSITY MEDICAL CENTER (2 Service Sites)
		1266		NC	MOUNTAINS COMMUNITY HOSPITAL
		1308	C		REDLANDS COMMUNITY HOSPITAL
		1323	C		COMMUNITY HOSPITAL OF SAN BERNARDINO
		1339	C		ST. BERNARDINE MEDICAL CENTER
		4121	C		ROBERT H. BALLARD REHABILITATION HOSPITAL
		4231	C		ARROWHEAD REGIONAL MEDICAL CENTER
		TOTAL	6	2	
INLAND N. SAN DIEGO CO.	1412	755	C		PALOMAR MEDICAL CENTER
		977	C		POMERADO HOSPITAL
		TOTAL	2	0	
COASTAL N. SAN DIEGO CO.	1414	705	C		FALLBROOK HOSPITAL
		780	C		TRI-CITY MEDICAL CENTER
		TOTAL	2	0	

APPENDIX B

MEDI-CAL HOSPITAL CONTRACTING STATUS BY AREA AS OF DECEMBER 1, 2001

AREA	HFPA	FCL ID	CONTRACT STATUS		HOSPITAL
			Contract	Non-Contract	
		673	C		CHILDREN'S HOSPITAL OF SAN DIEGO
		694	C		DONALD N. SHARP MEMORIAL COMMUNITY HOSPITAL
		695	C		SHARP MARY BIRCH HOSPITAL FOR WOMEN
		730		NC	KAISER FOUNDATION HOSPITAL - SAN DIEGO
		771	C		SCRIPPS MEMORIAL HOSPITAL - LA JOLLA
		1256	C		CECIL H. & IDA M. GREEN HOSP OF SCRIPPS CLINIC
		1394	C		SCRIPPS MEMORIAL HOSPITAL - ENCINITAS
		4141		NC	UCSD - LA JOLLA - THORNTON HOSPITAL
		=====		=====	
NORTH SAN DIEGO CITY	1416	TOTAL	6	2	
		652	C		ALVARADO HOSPITAL MEDICAL CENTER
		721		NC	KINDRED HEALTHCARE - SAN DIEGO
		744	C		MERCY HOSPITAL AND MEDICAL CENTER
		782	C		U.C. SAN DIEGO MEDICAL CENTER
		787	C		VILLA VIEW COMMUNITY HOSPITAL
		4084		NC	SAN DIEGO HOSPICE ACUTE CARE CENTER
		4094		NC	CONTINENTAL REHABILITATION HOSP OF SAN DIEGO
		=====		=====	
CENTRAL SAN DIEGO CITY	1418	TOTAL	4	3	
		658	C		SCRIPPS MEMORIAL HOSPITAL - CHULA VISTA
		689	C		CORONADO HOSPITAL
		759	C		PARADISE VALLEY HOSPITAL
		875	C		SHARP CHULA VISTA MEDICAL CENTER
		=====		=====	
SOUTH SAN DIEGO CO.	1420	TOTAL	4	0	
		714	C		GROSSMONT HOSPITAL
		716		NC	KAISER FOUNDATION HOSPITAL - EL CAJON
		=====		=====	
EAST SAN DIEGO CO.	1422	TOTAL	1	1	
		=====		=====	
STATEWIDE TOTAL			236	74	

NOTES:

1) Hospitals whose name are in *ITALICS* and UNDERLINED are covered by one contract, although each service site is counted as a separate contract hospital.
Other hospitals with contracts that have multiple service sites are noted in *ITALICS* only and identify the number of service sites covered by the specific contract.

2) All Areas are designated as Closed except for HFPA's 517-Los Banos, 705-Salinas and 1014-Huntington Beach.

SOURCE: California Medical Assistance Commission Management Information System